DECLARATION AND POWER OF ATTORNEY



Our File: 0375.3-1-1

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: SPECTRALLY ENCODED MINIATURE ENDOSCOPIC IMAGING PROBE, the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of my foreign application(s) for patent or inventor's certificate listed below, and have also identified below any foreign application for patent or inventor's certificate disclosing subject matter in common with the above-identified specification and having a filing date before that of the application on which priority is claimed:

application on which priority		in the above identifie	u speemen.		**********	, 4	u	,01010	
Country Ap	plication No.	Date of Filing	2	Priority	ority Claimed Under 35 U.S.C. §119			S.C. §119	
					Yes		\boxtimes	No	
I hereby claim the benefit usinsofar as the subject matter the manner provided by the information as defined in Tital application and the national of the subject to the su	of each of the	ne claims of this application of Title 35, United S	tates Code (disclosed §112, I ad	in the	prior Uni	ited Sta	ates applicati	ion in
Application Number		Filing Date			Status				
I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statement were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patents issuing thereon. POWER OF ATTORNEY: Jason A. Bernstein, Reg. No. 31,236, and John W. Greenwald, Reg. No. 41,803, are hereby appointed to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Send correspondence to: Jason A. Bernstein BERNSTEIN & ASSOCIATES, P.C. 6600 Peachtree Dunwoody Road, N.E. Embassy Row 400, Suite 495 Atlanta, Georgia 30328-1649									
Full name of sole or first inventor:	Guillermo	J. Tearney		Citizensh	nip:	USA	•		
Residence:	118 Kinn:	118 Kinnaird St. #3, Cambridge, MA 02139							
Post Office Address:	118 Kinna	aird St. #3, Cambridge,	MA 02139	·					
Inventor's signature:					Date	:			
Full name of second inventor:	Brett Eug	ene Bouma		Citizensh	nip:	USA			
Residence:	12 Monm	12 Monmouth Street, Quincy, MA 02171							
Post Office Address:	12 Monm	outh Street, Quincy, M	A 02171						
Inventor's signature:					Date	::			

Full name of third inventor:	N Stefanov Shishkov	Citizenship:	Bulgaria	
Residence:	122 Bowdoin St., Apt. 82, Boston,	MA 02108		÷ .
Post Office Address:	122 Bowdoin St., Apt. 82, Boston,	MA 02108		
Inventor's signature:		Da	te:	
Full name of fourth inventor:	Jonathan Jay Rosen	Cîtizenship:	USA	
Residence:	12 Surrey Road, Newton, MA 024	58	-1	
Post Office Address:	12 Surrey Road, Newton, MA 024	58		
Inventor's signature:		Da	te:	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR §§ 1.9(F) AND 1.27(d) — NONPROFIT ORGANIZATION)

Inventor(s):	Guillermo J. Tearney et al.			
Serial No.:	Not yet assigned			
For:	SPECTRALLY ENCODED MINIATURE IMAGING PROBE			
I hereby declaridentified belo		official empowered to act on behalf of the nonprofit organization		
Name of Orga	nization:	The General Hospital Corporation		
Address of Organization:		55 Fruit Street, Boston, Massachusetts 02114		
TYPE OF C		: UNIVERSITY OR OTHER INSTITUTION OF HIGHER		
organization a and (b) of Ti ENCODED M	as defined in 37 of the 35 United Sta	nprofit organization identified above qualifies as a nonprofit CFR §1.9(e) for purposes of paying reduced fees under §§41(a) ates Code with regard to the invention entitled SPECTRALLY AGING PROBE by Guillermo J. Tearney and Brett E. Bouma led herewith.		
		der contract or law have been conveyed to and remain with the above identified invention.		
organization l held by any p under 37 CFF	having rights to the erson, other than R §1.9(d) or by an	fit organization are not exclusive, each individual concern or he invention is listed below* and no rights to the invention are the inventor, who could not qualify as a small business concern by concern which would not qualify as a small business concern profit organization under 37 CFR §1.9(e).		
*Note: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR §1.27)				
NAME		<u> </u>		
ADDRESS _				
(0375.3-1-1P/MGH	1665)			

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR §1.28(b))

BERNSTEIN&ASSOC.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING:

David J. Glass, Ph.D.

TITLE IN ORGANIZATION:

Associate Director for Patents, Office of Technology Affairs

ADDRESS OF PERSON SIGNING: 55 Fruit-Street, Boston, Massachusetts 02114

SIGNATURE

Attorney Docket No.: 0375/3-1-1P

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